inhaling benzine fumes. According to the observations of various authors, benzine exerts a particular toxic effect on the central nervous system, the gastro-intestinal tract, the lungs, and the pleura. Convulsions and vomiting are common and the latter occurs in the inhalation cases also, though less severely. The vomiting of blood and mucus and a diarrhea of the same character occur in cases in which the benzine has been swallowed. The heart action is rapid and irregular and disturbed breathing is common. The temperature rises, in some reported cases to 40.2° C. Loss of consciousness often occurs with great suddenness. Friediger reports his own case of an infant, aged six weeks, which he had been treating for furunculosis complicating an eczema, anemia, and general malnutrition. The infant was much improved and adhesive plaster was being used as a dressing for furuncular areas on the trunk. On one day benzine was employed to loosen the adhesive and cleanse the skin, a fresh adhesive dressing being placed on the various areas. Almost immediately afterward the child became restless, began to vomit, and to have convulsive movements. Within twenty-four hours the child presented absolute pallor, emaciation, expulsive vomiting, convulsions, dyspnea, retracted abdomen, fever, and rapid pulse. It became practically moribund. Immersion in wheat-bran baths and cool sponges improved the condition, and in twenty-four hours the child's condition was good and the toxic symptoms had disappeared. The points of interest in this case are the age of the child (six weeks), and the poisoning by inhalation of fumes from the local application of benzine. Absorption through the skin was possibly a further factor. The case further indicates the danger of the local use of benzine on very young infants with very weak constitutions.

The Eucalyptus Treatment in Scarlet Fever.—E. Koerber (*Münch. Med. Woch.*, 1912, lix, 581), reports the results obtained by Dr. Rumpel in Eppendorf in testing the eucalyptus treatment in scarlet fever as practised by Milne in England. Milne applies twice daily for the first four days the pure eucalyptus oil to the entire body surface and repeats this once daily for the following six days. He also applies a 10 per cent. solution of carbolic acid in oil to the tonsils every two hours for the first two days. His patients are not isolated and he claims no contagion to unprotected children resulting, either during or after the disease. In an epidemic in Eppendorf the cases were divided as to treatment for the sake of comparison. There were 274 cases treated in the usual manner and 151 with the method of Milne: Infection was transmitted by cases returned to their homes as cured in the following proportions. In 86 cases not treated with eucalyptus oil it occurred 3 times, or 3.5 per cent. In 73 cases treated with eucalyptus oil it occurred 4 times, or 5.5 per cent. Those cases only were reported where the family could be under close observation constantly, thus ruling out infection from other sources. The mortality was only 0.56 per cent. less in the eucalyptus series. It was noteworthy, however, that the complications of endocarditis, nephritis, glandular suppuration, and otitis were 50 per cent. less frequent in the eucalyptus series than under the ordinary treatment. The joint complications however, were more frequent. A shortening of the course of the disease with the eucalyptus treatment was not observed. The period of infectivity was not shortened, one of the return cases infecting the family three months after the primary onset. Therefore the authors are not convinced of Milne's claims from the above experiences in Eppendorf.

Purpura in Infective Diarrhea.—H. D. ROLLESTON and J. B. MOLONY (*Brit. Jour. Child. Dis.*, 1912, ix, 1) analyzed 100 cases of infective diarrhea in infants to determine the frequency of symptomatic purpura in this disease. Of the 100 cases, averaging infants from seven to eighth months and of both sexes, 67 proved fatal. Of the 67, 16.4 per cent. showed purpura. None of the purpuric cases showed edema. The abdomen and thorax is the frequent site of the purpuric eruption, though the arms and legs are occasionally involved. The hemorrhages are usually small, but may be so closely set as to make the abdomen appear uniformly purple from a distance. The purpura was usually a late symptom and appeared about the thirty-fourth day, a week before death. Occasionally the hemorrhages came out in crops. Transfusion and the administration of horse or other serum seemed to have no influence in causing purpura. In one case only was there evidence of infantile scurvy. No close relation is suggested between purpura and the edema sometimes seen in infective diarrhea. The prognosis appears extremely grave, as all the cases mentioned above died. Voelcker, however, says it is by no means a necessarily fatal sign. To conclude, symptomatic purpura in infective diarrhea mainly occurs on the abdomen and chest of infants under one year of age. It is usually a terminal phenomenon in prolonged cases, and the prognosis is extremely grave.

Drunkards' Children among the Weaklings at School.—EUGEN SCHLESINGER (*Münch. Med. Woch.*, 1912, lix, 649), reporting his observations on weak and backward school children, states that the two important factors in the inherited low resistance and organic weakness of many children are, first, a neuro-psychopathic constitution of the parents, and second, alcoholism in the parent. Next in importance and frequency is syphilis. Out of 200 weaklings studied, Schlesinger found 30 per cent. who were the children of drunkards. A percentage of 40 to 60 was found in severe intellectual weakness, in imbecility, and idiocy. The low vitality found in drunkards' children is traced back to the female parent. Sullivan and Arrivé state that 55 per cent. of the children of alcoholic mothers die either at birth or within two years. The extent of the degeneration in the children can be gauged by their constitution. Only 33 per cent. of them were in good constitution, 57 per cent. only fair, and 9 per cent. very poor. These unfortunate children show nutritional disturbances, catarrh of the respiratory tract, and especially lowered immunity to infections from their first year of life. The most intense and destructive effects of this heredity are seen in the central nervous system, especially the motor side, resulting in convulsive attacks, tic, and epilepsy. While defective intelligence was probably not more marked in the drunkards' children than in other defectives, the psychic, ethical, and moral defectiveness was well marked and combined with an unstable, mercurial temperament. A tendency toward alcoholism is often observed in the offspring of alcoholics. The future of such children is unpromising and an early severing of home associations and strict disciplinary schooling is imperative.